PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where

indicated unless corrected by maintenance fee notification	pelow or directed otherwise :	in Block 1, by (a) specifyir	ng a new corre	spondence addres	s; and/or (b) indi	cating a sepa	
1 75	with any corrections or use Block 1)	Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
STALLMAN & I Suite 290 121 Spear Street San Francisco, CA	JUN 0 7 300X E	I h Sta ado tra	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.				
		S. Jes	_(Georgia K.	. Stith		(Depositor's name)
		TENT & TRADE		_Tear	gia K.	Siet	(Signature)
	•		Ŀ	June 4.	⁴ 2004		(Date)
APPLICATION NO.	FILING DATE	FIRST NA	MED INVENTO	₹	ATTORNEY DO	OCKET NO.	CONFIRMATION NO.
10/643,348	10/643,348 08/19/2003		s N. Koppel	TWI-11720		720	3808
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBL	ICATION FEE	TOTAL FEE	(S) DHE	DATE DUE
nonprovisional	YES	\$665	FOBL	\$300	\$96		06/28/2004
						,	00/20/2004
EXAMINER VIVIA DEFE IDA VIVI		ART UNIT		S-SUBCLASS	_		
KIKNADZE, IRAKLI 1. Change of correspondence address or indication of "F		2882	37	8-070000			
Address form PTO/SB/12 "Fee Address" indication PTO/SB/47; Rev 03-02 of Number is required.	on (or "Fee Address" Indicati or more recent) attached. Use	a form a Customer and agent) and the names of up to 2 registered agent attorneys or agents. If no name is listed will be printed.			stered patent	·	
PLEASE NOTE: Unless	RESIDENCE DATA TO BE an assignee is identified belo d to the USPTO or is being su EE	ow, no assignee data will ap abmitted under separate cov	opear on the pa er. Completion	tent Inclusion of	OT a substitute for	nly appropri filing an ass	ate when an assignment has ignment.
THERMA-WAVE, INC. 1250 Reliance Way, Fremont, CA 94539							
Please check the appropriate	assignee category or categor	ies (will not be printed on th	ne patent);	□individual X	corporation or ot	her private gr	roup entity government
4a. The following fee(s) are	enclosed:	4b. Payment	` '			_	
XXIssue Fee			A check in the amount of the fee(s) is enclosed.				
XX Deposit Account Number 50-1703 is attached. XX Or The Director is hereby authorized by charge the required fee(s), or credit any over Deposit Account Number 50-1703 (enclose an extra copy of this form							credit any overpayment, to
Director for Patents is reques	sted to apply the Issue Fee an						
			_	y previously paid		prication ide	
	allman (Reg. No	29,444)	/2004				
other than the applicant; interest as shown by the rec	Publication Fee (if require a registered attorney or age cords of the United States Pat	nt; or the assignee or othe ent and Trademark Office.	er party in	06/08/2004	Wabrham2 0000	0128 1064	3348
This collection of informa obtain or retain a benefit lapplication. Confidentiality estimated to take 12 minut completed application for case. Any comments on suggestions for reducing the Patent and Trademark (22313-1450. DO NOT S. SEND TO Commissions)	1.311. The information is r e (and by the USPTO to p 22 and 37 CFR 1.14. This conthering, preparing, and subrivary depending upon the equire to complete this for the Chief Information Off Commerce, Alexandria, ED FORMS TO THIS A initia 2231.3.1450	required to process) an oblection is mitting the individual rrm and/or ficer, U.S., Virginia DDRESS.	01 FC:2501 02 FC:1504 03 FC:8001			665.00 OP 300.00 OP 15.00 OP	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Louis N. Koppel et al.

Application No.: 10/643,348

Filed: August 19, 2003

For: CALIBRATION AND ALIGNMENT

OF X-RAY REFLECTOMETRIC

SYSTEMS

Confirmation No.: 3808

Group Art Unit: 2882

Examiner: I. Kiknadze

SUBMISSION OF ISSUE FEE

353 Sacramento Street, Suite 2200 San Francisco, CA 94111 (415) 772-4900

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope, addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on June 4, 2004.

STALLMAN & POLLOCK LLP

Dated: 06/4/2004

___By:____

Jeorgia K jeorgia K Stith

M/S ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Per the Notice of Allowance and Issue Fee Due which was mailed March 26, 2004, enclosed for filing in the above-captioned case are form PTOL-85b and a check for \$980.00 to cover the issue fee of \$665.00, the publication fee of \$300.00 and the payment of \$15.00 for ordering five (5) advanced copies of the patent upon issuance.

The Commissioner is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. <u>50-1703</u>, under Order No. <u>TWI-11720</u>. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

STALLMAN & POLLOCK LLP

Dated: June 4, 2004

Michael A. Stallman

Reg. No. 29,444

Attorneys for Applicant(s)

Atty Docket No.: TWI-11720